

FIG. 1

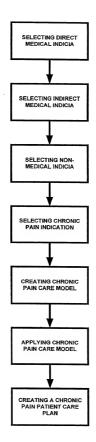


FIG. 2

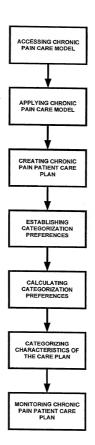


FIG. 3

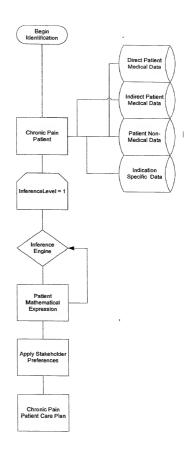


FIG. 4

The Direct Medical Indicia example used in this document relates to the humbar code. The Direct Medical Indicia example used in this document relates to the humbar spine pain indicator. Pot this seminary as specific (T-D-D-CM diagnostic code relating to the underlying injury. The presence of finis (and similar codes for other pain indications) is a significant indicator for the presence of pain. 2. ICD-9-CM Procespecific" Generalized Pain In this common for pain patients to be characterized in a "hom-specific" manner by providers syndrome Diagnoses Codes. 3. ICD-9-CM Diagnosis Code Identifying a Co- Chronic plan patients typeall there are associated in the medical condition in condition. 4. ICD-9-CM Diagnosis Code Identifying a Co- Chronic plan patients typeall there are associated with Lumba be learned from the inductive learning capabilities of the chronic condition morbidity. Commonly Associated with Lumba the inductive learning capabilities of the chronic condition. 4. ICD-9-CM Medical Condition There are numerous known medical conditions for which pain is an associated biagnosis Commonly Associated from the inductive learning capabilities of the chronic condition. Diagnostic Code Clearly Attributing the symptom. Often, these conditions are reflected in the medical data, while the Condition is Related to a Known Acute Pain associated by the treatment of acute pain. 5. ICD-9-CM Procedure Codes Indicating the Significant indicator for the presence of our or more of these condition is Related to a Known Acute Pain associated with the treatment of acute pain. 6. CPT Codes Indicating the Condition is Related There is a commonly accepted list of known ICD-9-CM procedure codes Spine Care. 6. CPT Codes Indicating the Condition is Related There is a commonly accepted list of known ICD-9-CM procedure codes some associated with the treatment of centre pain. 7. ICD-9-CM Procedure Codes Relating to Lumbar There is a commonly accepted list of known ICD-9-CM procedure codes Relating to Lumbar There is a significa		Direct Medical Indicia	Remarks
2. ICD-9-CM. "Non-specific" Generalized Pain It is common for pain to be characterized in a "non-specific" manner by providens Syndrome Diagnoses Codes. Syndrome Diagnoses Codes. Non-sepecific manner by providens and the presence of pain and proper infliction. ICD-9-CM Diagnostic Code Identifying a Co- clusters of these other health issues can be identified in the data, and more will spine fujury. ICD-9-CM Diagnostic Code Clearly Attributing the rear numerous known medical conditions for which pain is an associated Diagnostic Code Clearly Attributing the examination and the commonly accepted list of known ICD-9-CM procedure Codes Indicating the symptom. Offer, these conditions are reflected in the medical data, while the wint Chronic Pain and syndrom of the symptom. Offer, these conditions are reflected in the medical data, while the symptom. Offer, these conditions are reflected in the medical data, while the wint Chronic Pain condition are symptom. Offer, these conditions are reflected in the medical data, while the symptom. Offer, these conditions are reflected in the medical data, while the symptom. Offer, these conditions are reflected in the medical data, while the symptom. Offer, these conditions for which pain is an associated bring the symptom. Offer, these conditions are reflected in the medical data, while the symptom. Offer, these conditions are reflected in the medical data, while the condition of the presence of a pain condition. CPT Codes Indicating the Condition is Related. There is a commonly accepted list of known plysician services (CPT) codes operative surgical pain). CPT Codes Indicating the Condition is Related. There is a significant indicator for the presence of one or more of these operative surgical pain). CPT Codes Relating to Lumbar (Pare 1s a significant indicator for the presence of one or more of charge operative surgical pain). Simple Pain. The presence of one or more of these sociated with the treatment of cause pain. The presence of one or more of these sociated with th		. ICD-9-CM "Specific" Lumbar Spine Diagnoses Code.	The Direct Medical Indicia example used in this document relates to the lumbar spine pain indication. For this example there is a specific (ID-9-CM diagnostic code relating to the underlying injuy. The presence of this (and similar codes for other pain indications) is a significant indicator for the presence of pain.
3. 1CD-9-CM Diagnosts Code Identifying a Co- Spiritive Commonly Associated with Lumbur or chilaters of these other health issues can be identified in the data, and more will spin be larmed from the inductive learning capabilities of the chronic condition management system. 4. ICD-9-CM "Other" Medical Condition There are numerous known medical conditions for which pain is an associated Dagnostic Code Clearly Attributing the expression. Offer, these conditions are reflected in the medical data, while the condition to a Diagnostic Code Clearly Attributing the symptom. Offer, these conditions are reflected in the medical data, while the with Chronic Palm. 5. ICD-9-CM Procedure Codes Indicating the Farsh of the expression of the crue pain. The presence of these codes with Chronic Repression of the commonly accepted list of known ICD-9-CM procedure codes as a significant indicator for the presence of a pain condition. 6. CPT Codes Indicating the Condition is Related There is a commonly accepted list of known plysician services (CPT) codes relating the Condition is Related There is a commonly accepted list of known plysician services (CPT) codes relating the Condition is Related There is a commonly accepted list of known plysician services (CPT) codes relating to Codes Relating to Lumbar There is a commonly accepted list of known ICD-9-CM procedure codes Spine Care. 6. ICD-9-CM Procedure Codes Relating to Lumbar There is a commonly accepted list of known ICD-9-CM procedure codes associated with lumbar spine ear. It is commonly accepted list of known ICD-9-CM procedure codes Spine Pain. 8. ICD-9-CM Procedure Codes Relating to Lumbar There is a commonly accepted list of known ICD-9-CM procedure codes associated with the treatment of the presence of funder spine pain. 8. ICD-9-CM Procedure Codes Relating to Lumbar the restance of lumbar spine pain. 9. ICD-9-CM Procedure Codes Relating to Lumbar the treatment of content of the presence of one or more of these codes is a significant indicator for the presence of one	2		It is common for pain to be characterized in a non-specific, manner by providers who are not pain treatment specialists. However, this code indicates the presence of pain, and is an important indicator.
 LOD-9-CM "Other" Medical Condition There are numerous known medical conditions for which pain is an associated Diagnostic Code Clearly Attributing the symptom. Offer, these conditions are reflected in the medical data, while the Condition to a Diagnostic Code Clearly Attributing the presence of these codes with Chronic Pain. ICD-9-CM Procedure Codes Indicating the There is a commonly accepted list of known ICD-9-CM procedure codes Condition is Related to a Known Acute Pain codes is a significant indicator for the presence of cute pain. CPT Codes Indicating the Condition is Related pain. CPT Codes Indicating the Condition is Related pain. CPT Codes Indicating the Condition is Related to a Known Acute Pain condition. CPT Codes Indicating the Condition is Related with the treatment of acute pain. The presence of one or more of these operative surgical pain. LICD-9-CM Procedure Codes Relating to Lumbu Repeated with Lumbur spine care. It is commonly accepted list of known ICD-9-CM procedure codes Spine Care. LICD-9-CM Procedure Codes Relating to Lumbu Repeated is a significant indicator for the presence of caute pain. LICD-9-CM Procedure Codes Relating to Lumbu Repeated to the presence of acute pain. LICD-9-CM Procedure Codes Relating to Lumbu Repeated to the presence of Lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur Repeated to the protein Research of Lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur Research of the presence of Lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur Interestment of Lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur Interestment of Lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur Interestment of Spine Pain Research of Diambur Processor of Lumbur Spine pain. LICD-9-CM Procedure Codes Relating to Lumbur Interestmen	w.	ICD-9-CM Diagnosis Code Identifying a Comorbidity Commonly Associated with Lumbar Spine Injury.	Chronic pain patients typically have an assortment of health problems. Patterns or clusters of these other lealth issues can be identified in the data, and more will be learned from the inductive learning capabilities of the chronic condition management system.
 ICD-9-CM Procedure Codes Indicating the There is a commonly accepted list of known ICD-9-CM procedure codes Condition is Related to a Known Acute Pain associated with the treatment of acute pain. CPT Codes Indicating the Condition is Related bails significant indicator for the presence of acute pain. CPT Codes Indicating the Condition is Related with the treatment of acute pain. CPT Codes Indicating the Condition (e.g. post-associated with the treatment of acute pain. TCD-9-CM Procedure Codes Relating to Lumbar There is a commonly accepted list of known ICD-9-CM procedure codes Spine Care. ICD-9-CM Procedure Codes Relating to Lumbar There is a commonly accepted list of known ICD-9-CM procedure codes associated with the treatment of acute pain. ICD-9-CM Procedure Codes Relating to Lumbar There is a commonly accepted list of known ICD-9-CM procedure codes Spine Care. ICD-9-CM Procedure Codes Relating to Lumbar There is a commonly accepted list of known ICD-9-CM procedure codes Spine Pain. ICD-9-CM Procedure Codes Relating to Lumbar There is a commonly accepted list of known ICD-9-CM procedure codes Spine Pain. ICD-9-CM Procedure Codes Relating to Lumbar Interpretation of Imperative spine pain. ICD-9-CM Procedure Codes Relating to Lumbar Interpretation of Imperative spine pain. ICD-9-CM Procedure Codes Relating to Lumbar Interpretation of Imperative spine pain. ICD-9-CM Procedure Codes Relating to Lumbar Interpretation of Imperative spine pain. ICD-9-CM Procedure Codes Relating to Lumbar Interpretation of Imperative spine pain. ICD-9-CM Procedure Codes Relating to Lumbar Interpretation of Imperative of Imperative Office of Imperative Offices Codes is a significant indicator for the presence of Imperative Offices Codes Interpretation of Chronicity course of 2-91 days tends to indicate a pattern of chronicity course of 2-91	4.	ICD-9-CM "Other" Medical Condition Diagnostic Code Clearly Attributing the Condition to a Diagnosis Commonly Associated with Chronic Pain.	There are numerous known medical conditions for which pain is an associated symptom. Often, these conditions are reflected in the medical data, while the pain condition is not specifically coded. Identifying the presence of these codes it as a significant indicator for the presence of a pain condition.
 CPT Codes Indicating the Condition is Related There is a commonly accepted list of known physician services (CPT) codes to a Known Acute Pain. Lob-SCM Procedure Codes Relating to Lumbur There is a commonly accepted list of known ICD-9-CM procedure codes Spine Care. LiCD-9-CM Procedure Codes Relating to Lumbur There is a commonly accepted list of known ICD-9-CM procedure codes associated with Lumbur spine care. The presence of one or more of these codes is an indicator for the potential presence of lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur These codes is an indicator for the potential presence of lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur These codes is an indicator for the protential presence of lumbur spine pain. LiCD-9-CM Procedure Codes Relating to Lumbur These codes is an indicator for the presence of lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur These codes is a significant indicator for the presence of lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur These codes is a significant indicator for the presence of lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur These codes is a significant indicator for the presence of lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur The These codes is a significant indicator for the presence of lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur The These codes is a significant indicator for the presence of lumbur spine pain. LICD-9-CM Procedure Codes Relating to Lumbur The Spine Pain Establishing a Pattern of Chronicity course of 2-91 days tends to indicate a pattern of chronicity course of 2-91 days tends to indicate a pattern of chronicity. 	.5.		There is a commonly accepted list of known ICD-9-CM procedure codes associated with the treatment of acute pain. The presence of one or more of these codes is a significant indicator for the presence of acute pain.
7. ICD-9-CM Procedure Codes Relating to Lumbur There is a commonly accepted list of Ranown ICD-9-CM procedure codes Spine Gare. Spine Gare. Spine Gare. Spine Gare. Spine Gare. 1. ICD-9-CM Procedure Codes Relating to Lumbar the second is an indicator for the potential presence of lumbar spine pair.	9		There is a commonly accepted list of known physician services (CPT) codes associated with the treatment of acute pain. The presence of one or more of these socials is a significant indicator for the presence of acute pain.
 ICD-9-CM Procedure Codes Relating to Lumbar There is a commonly accepted list of known ICD-9-CM procedure codes Spine Pain. ICD-9-CM Procedure Codes Relating to Lumbar for these codes is a significant indicator for the presence of lumbar spine pain. ICD-9-CM Procedure Codes Relating to Lumbar It is assumed that a pattern of specific treatment occurring continuously over the Spine Pain Establishing a Pattern of Chronicity course of 2-91 days tends to indicate a pattern of chronicity. 	7.	ICD-9-CM Procedure Codes Relating to Lumbar Spine Care.	There is a commonly accepted list of Known ICD-9-CM procedure codes associated with lumber spine care. It is commonly accepted that pain is often concomizantly associated with lumber spine care. The presence of one or more of these codes is an indicator for the potential presence of lumber spine pain.
 ICD-9-CM Procedure Codes Relating to Lumbar It is assumed that a pattern of specific treatment occurring continuously over the Spine Pain Establishing a Pattern of Chronicity course of 2-91 days tends to indicate a pattern of chronicity. (time and homogeneity). 	∞		There is a commonly accepted list of known ICD-9-CM procedure codes associated with the treatment of lumbar spine pain. The presence of one or more of these codes is a significant indicator for the presence of lumbar smine pain.
	6	ICD-9-CM Procedure Codes Relating to Lumbar Spine Pain Establishing a Pattern of Chronicity (time and homogeneity).	It is assumed that a pattern of specific treatment occurring continuously over the course of ≥ 91 days tends to indicate a pattern of chronicity.

Direct Medical Indicia	Remarks
 CPT Codes Identifying Lumbar Spine Care- related Procedures. 	10. CPT Codes Identifying Lumbar Spine Care— There is a commonly accepted list of known physician service (CPT) codes related Procedures. Concominantly associated with lumbar spine care. The presence of one or more of these codes is an indicator for the protential presence of lumbar spine pain.
 Cofes Identifying Lumbar Spine Pain- related Procedures. 	11. CPT Codes Identifying Lumbar Spine Pain- There is a commonly accepted its of known plysician service (CPT) codes related Procedures. associated with the treatment of lumbar spine pain. The presence of one or more related Procedures. of these codes is a significant indicator for the presence of lumbar spine pain.
 CPT Codes Identifying Lumbar Spine Pain- related Procedures Establishing a Pattern of Chronicity. 	12. CPT Codes Identifying Lumbar Spine Paine In is assumed that a pattern of specific treatment occurring continuously over the related Procedures Establishing a Pattern of course of ≥91 days tends to indicate a pattern of chronicity.
13. Drug Prescription Codes for opioid, non- steriodal or muscle relaxant indicating dosage, frequency, length of time, combinations consistent with spine pain treatment.	13. Drug Prescription Codes for opioid, non- There is a commonly accepted list of nationally recognized drug codes associated steriodal or muscle relaxant indicating dosage, with the treatment of lumbar spine pain. The presence of one or more of these frequency, length of time, combinations codes is an indication of the presence of lumbar spine pain. The predictive power consistent with spine pain treatment.
14. Drug Prescription Codes for opioid, non- steriodal or muscle relaxant indicating dosage, frequency, length of time, combinations identifying patient as being at risk of developing a chronic lumbar pain condition.	14. Drug Prescription Codes for opioid, non- A patient's drug treatment regiment is significantly related to their propensity to steriodal or muscle relaxant indicating dosage, later develop a chronic pain condition. Inequency, length of time, combinations identifying patient as being at risk of developing a chronic lumbar pain condition.
15. Drug Prescription Codes for opioid, non- steriodal or muscle relaxant indicating dosage, frequency, length of time, combinations consistent with chronic spine pain treatment.	15. Drug Prescription Codes for opioid, non- it is assumed that a pattern of specific treatment occurring continuously over the steriodal or muster behavint indicating dosage, course of ≥91 days tends to indicate a pattern of chronicity. Infequency, length of time, combinations consistent with chronic spine pain treatment.
16. Emergency Room Visits (with ICD-9-CM, CPT or Drug Codes, or test results) Indicating a Lumbar Spine Condition	A p unc pati roor sign
•	FIG. 55

Direct Medical Indicia	Remarks
17. Emergency Room Visits (with ICD-9-CM, CPT or Drug Codes, or test results) Indicating a	Emergency Room Visits (with ICD-9-CM, CPT A patient's frequent use of emergency room services is an indicator of an or Drug Codes, or test results) Indicating a uncontrolled or 'spiking' medical condition. It is common for lumbar spine
Lumbar Spine Pain Condition	patients who are experiencing associated severe pain, to make use of emergency room services, particularly those associated with pain control. This is a significant indicator of the presence of uncontrolled pain.
18. Emergency Room Visits (with ICD-9-CM, CPT or Drug Codes, or test results) Establishing the Chronicity of a Lumbar Spine Pain Condition (time and pattern or homogeneity)	18. Emergency Room Visits (with ICD-9-CNL, CPT It is assumed that a pattern of specific treatment cocurring continuously over the or Drug Codes, or test results) Establishing the Chronicity of a Lumbar Spine Pain Condition (time and pattern or homogeneity)
 Hospitalizations Visits (with ICD-9-CM, CPT or Drug Codes, or test results) Indicating a Lumbar Spine Condition 	19. Hospitalizations Visits (with ICD-9-CNI, CPT or "Days in hospital" is an indicator of a patient's uncontrolled or "spiking" medical Drug Codes, or test results) Indicating a Lumbar condition, and can relate to severity level of that patient's medical condition. Lumbar spine patients who are experiencing associated severe pain, are sometimes hospitalized for that condition. This is a significant indicator of the presence of uncontrolled pain.
20. Hospitalizations Visits (with ICD-9-CM, CPT or Drug Codes, or test results) Indicating a Lumbar Spine Pain Condition	20. Hospitalizations Visits (with ICD-9-CM, CPT or "Days in hospital" is an indicator of a patient's uncontrolled or "spiking" medical Drug Codes, or test results) Indicating a Lumbar condition, and can relate to severity level of that patient's medical condition. Lumbar spine patients who are experiencing associated severe pain, are sometimes hospitalized for that condition. This is a significant indicator of the presence of uncontrolled pain.
21. Hospitalizations Visits (with ICD-9-CM, CPT or Drug Codes, or test results) Establishing the Chronicity of Lumbar Spine Pain Condition (rime and nattern or homogenetic)	21. Hospitalizations Visits (with ICD-9-CM, CPT or It is assumed that a pattern of specific treatment occurring continuously over the Drug Codes, or test results) Establishing the Chronicity of Lumbar Spine Pain Condition (fine and nattern or homogeneity)
22. Physician Office Visits (with ICD-9-CM, CPT or Drug Codes, or test results) Indicating a Lumbar Spine Condition	22. Physical Office Visits (with ICD-9-CM, CPT Frequency of "physician office visits" is an indicator of a patient's uncontrolled · or Drysical Office Visits (with ICD-9-CM, CPT requency of "physician office visits" is an indicator of a patient's uncontrolled · or "spiking" medical condition. Lumbar spine patients who are experiencing associated severe pain often seek in-office physician care for that condition. This is a significant indicator of the presence of uncontrolled pain.

Direct Medical Indicia	Remarks
23. Physician Office Visits (with ICD-9-CM, CPT	23. Physician Office Visits (with ICD-9-CM, CPT Frequency of "physician office visits" is an indicator of a patient's uncontrolled
or Drug Codes, or test results) Indicating a	or Drug Codes, or test results) Indicating a or "spiking" medical condition, and can relate to severity level of that patient's
Lumbar Spine Pain Condition.	medical condition. Lumbar spine patients who are experiencing associated severe
4	pain often seek in-office physician care for that condition. This is a significant
	indicator of the presence of uncontrolled pain.
24. Physician Office Visits (with ICD-9-CM, CPT	24. Physician Office Visits (with ICD-9-CM, CPT Frequency of "physician office visits" is an indicator of a patient's uncontrolled
or Drug Codes, or test results) Establishing the	or Drug Codes, or test results) Establishing the or "spiking" medical condition. Lumbar spine patients who are experiencing
Chronicity of a Lumbar Spine Pain Condition	Chronicity of a Lumbar Spine Pain Condition associated severe pain often seek in-office physician care for that condition. This
(time and pattern or homogeneity of complaint).	(time and pattern or homogeneity of complaint). Is a significant indicator of the presence of uncontrolled pain.
25. Rehabilitation or Palliative Care ICD-9-CM	25. Rehabilitation or Palliative Care ICD-9-CM Pain patients often receive rehabilitation or palliative care services as a part of
Procedure Codes.	their proscribed treatment regimen.
26. Telephone Consultation (with documentation	26. Telephone Consultation (with documentation Frequency of "telephone consultations" with a care provider is an indicator of a
relating to lumbar spine pain condition)	patient's uncontrolled or "spiking" medical condition. Lumbar spine patients who
	are experiencing associated severe pain often contact their care for that condition.
	This is an indicator of the presence of uncontrolled pain.
27. Coded Trauma (related test result, procedure,	27. Coded Trauma (related test result, procedure, Trauma is a precipitating factor for certain pain indications.
etc.).	

FIG. 5d

Direct Medical Indicia	Maximum	
Drug Product	Recommended Daily	Chronic Pain Indicators
0		
Over The Counter Non-Narcotte Analgesic Agents		
Acetaminophen (Tylenol)	12 tabs	12 tabs
		≥91 days
Aspirin 325mg	18 tabs	18 tabs
		≥91 days
bIbuprofen 200mg (Motrin)	16 tabs	16 tabs
		≥91 days
Salicylate Agents		
Salsalate 500mg (Disalcid)	6 tabs	6 tabs
		≥91 days
Diflunisal 500mg (Dolobid)	3 tabs	3 tabs
		≥91 days
Opioid and Related Analgesic Agents		
APAP/Propoxyphene Napsylate 100	6 tabs	6 tabs
(Darvocet-N 100)		≥91 days
APAP/Oxycodone 5/325 (Percocet)	12 tabs	12 tabs
		≥91 days
ASA/Oxycodone 5/325 (Percodan)	18 tabs	18 tabs
		≥91 days
APAP/Oxycodone 5/500 (Tylox)	8 tabs	8 tabs
		≥91 days
APAP/Hydrocodone 5/500 (Vicodin)	8 tabs	8 tabs
		≥91 days
APAP/Hydrocodone 10/650 (Lorcet)	6 tabs	6 tabs
		≥91 days
APAP/Hydrocodone 2.5/500 (Lortab)	8 tabs	8 tabs
		≥91 days

FIG. 6a

Direct Medical Indicia	Maximum	Chronic Pain
Drug Product	Recommended Daily	Indicators
	Dose (Adult)h	
APAP/Codeine 30/300 (Tylenol-3)	12 tabs	12 tabs
		≥91 days
Non-Steroidal Anti-inflammatory Drugs (NSAIDs)		
Celecoxih (Celebrex)	4 caps	4 caps
		≥91 days
Diclofenac 100mg ER (Voltaren XR)	2 tabs	2 tabs
		≥91 days
Etodolac Extended Release 400mg (Lodine XL)	3 tabs	3 tabs
		≥91 days
Naproxen Controlled Release 500mg (Naprelan)	2 tabs	2 tabs
		≥91 days
Nabumeton 500mg (Relafen)	4 tabs	4 tabs
		≥91 days
Muscle Relaxants .		
Carisoprodol (Soma)	4 tabs	4 tabs
		≥91 days
Chlorzoxazone (Paraflex)	12 tabs	12 tabs
		≥91 days
Cylobenzaprine (Flexeril)	6 tabs	6 tabs
		≥91 days
Diazepam 5mg (Valium)	8 tabs	8 tabs
		≥91 days
Metaxalone (Skelaxin)	8 tabs	8 tabs
		≥91 days
Methocarbamol 500 (Robaxin)	8 tabs	8 tabs
		≥91 days
Orphenadrine Citrate (Norflex)	2 tabs	2 tabs
•		≥91 days

FIG. 6b

Indirect Medical Indicia	Measure	Remarks
1. Physician Office Visits	a. Associated ICD-9-CM or CPT code.	Chronic pain patients frequently
a. Documented reason for visit	b. Medical record notation.	visit the physician office, for pain
b. Physician specialty	c. Associated time period, either multiple visits	related reasons as well as for
associated with visit	within an associated period of time; or pattern of	complaints of non-specific origin.
c. Time period establishing	visits showing elapsed period of time (e.g. >91	
chronicity	days).	
2. Emergency Room Visits	a. Associated ICD-9-CM or CPT code.	Chronic pain patients frequently
a. Reason for visit	b. Associated time period, either multiple visits	present to the ER for pain related
 Time period establishing 	within an associated period of time; or pattern of	reasons as well as for complaints
chronicity	visits showing elapsed period of time (e.g. >91	non-specific in origin.
	days months).	
3. Drug Therapy	a. Drug code for drugs (e.g. anti-inflammatory, anti-	Prescription and non-prescription
a. Drug prescription	depressant, muscle relaxant, opioid) associated	drug use is a common indicator of
b. Drug combinations	with pain symptom treatment.	chronic pain. Such drugs are
c. Dosing levels	b. Drug codes, when used in combination, tend to	often provided to patients from a
d. Prescription patterns	indicate presence of pain.	variety of sources in an
e. Time period establishing	c. Dosing level consistently high.	uncoordinated manner, or without
chronicity	d. Multiple prescribers.	the development of a patient plan
f. Pattern of substance abuse	e. Associated time period establishing elapsed period	of care.
	of time (>91 days).	
	 Evidence of drug over use or use of illegal drugs. 	
4. Telephone Consults		Chronic pain patients often
a. Documented reason for call	 a. Notation in medical record, associated code if 	demand more attention from their
b. Frequency of calls	possible.	caregivers than the general
c. Pattern of calls	 Calls outside the defined range of frequency for a 	population, for symptom -
d. Time period establishing	typical patient.	specific as well as for non-
chronicity	 c. Clustered calls with a defined time period. 	symptom specific reasons.
	e. Associated time period establishing elapsed	
	period of time (>91 days).	

Indirect Medical Indicia	Measure	Remarks
Primary Diagnosis	ICD-9-CM diagnostic code associated with pain	Chronic pain can be identified
	condition or trauma, or with a disease known to	through diagnostic codes two
	have associated pain condition.	ways: the pain can be a condition
		associated with a disease state
		such as diabetes (indirect), or it
		can be the primary reason for the
		pain condition such as low back
		pain (direct).
6. Co-Morbidities	ICD-9-CM diagnostic code associated with	Certain co-morbidities are known
	conditions known to occur with chronic pain.	to be associated with chronic
		pain.
7. Hospitalizations		Certain chronic pain patients are
 a. Time period establishing 	a. Associated time period either multiple visits within	frequently hospitalized, either to
chronicity	an associated period of time, or pattern of visits	treat spikes in pain, or to receive
 b. Admitting diagnosis 	showing elapsed period of time (e.g. >91 days).	back-related procedures.
c. Procedures performéd	b. Associated ICD-9-CM diagnostic code.	
	c. Pattern of ICD-9-CM and CPT procedure codes.	
8. Evidence of trauma	a. Test results such as x-ray, contained in medical	Numerous chronic pain
 a. Diagnostic test associated 	record.	indications are trauma-related in
with trauma		origin (e.g. CRPS).
Evidence of palliative or	a. ICD-9-CM procedure codes associated with	Chronic pain patients receive a
rehabilitation care	palliative or rehabilitation care.	variety of physical therapy,
 a. Documented procedure 	b. Evidence of care seeking behavior relating to	chiropractic services, acupuncture
 Pattern of care 	combination of providers.	therapy and other similar types of
c. Time interval establishing	c. Associated time period, either multiple visits	services to treat their condition.
chronicity	within an associated period of time; or pattern of	
	visits showing elapsed period of time (e.g. ≥91	
	days).	

FIG. 7b

L	Non-Medical Indicia	Remarks
l-i	Parient Self-Assessment - Pain Significantly Interferes with Life Activities	Patient self-assessment is one important and relevant perspective to measure the patient's perceptions relative to the impact the pain is having upon the quality of their life. This data is critical in stratifying patients; for example, a high score could trigger "a high need for treatment immediacy" category.
2	2. Patient Self-Assessment - High Pain Intensity Rating	This data is critical in stratifying patients, for example, a high score could trigger "a high need for treatment immediacy" category.
6.	3. Patient Self-Assessment - Intense and Multiple Pain Descriptors	This data is critical in stratifying patients, for example, a high score could trigger "a high need for treatment immediacy" category.
4	4. Patient Self-Assessment - High Impact of Pain on Mood	This data point is also a quality of life indicator, measuring patient's perception of how pain alters personality.
λ.	5. Patient Solf-Assessment - Low Family Support	Family support is a key indicator of treatment success. It also has an impact on the type of treatment that a provider will proscribe (For example, certain treatments are enhanced through the enounagement of family.)
9.	 Patient Self-Assessment - High Impact of Pain on Ability to Work 	This is a data point that will be of particular interest to the payer and employer. It also can be relevant in determining the type and intensity of treatment.
7.	7. Patient Self-Assessment - High Impact of Pain on Health Status	This data point is an important quality of life indicator.
∞ જ	8. Patient Self-Assessment - Dovntward Health Trend 9. Patient Self Assessment - Depression	This data point is an important quality of life indicator. Many chronic pain patients suffer from depression (accounting for up to 40% of overall health care osts associated with the treatment of low back.) It is a key chronic pain indicator, and will be a determining factor in course of treatment.
ΕE	10. Patient Self-Assessment - Low Life Satisfaction Score 11. Patient Self-Assessment, or Family Assessment - Poor Community Support Structure	This data point is an important quality of life indicator. Community support is a key indicator of treatment success.
12	12. Patient Self-Assessment - Low Job Satisfaction Score FTG	This data point is an important quality of life indicator. FIG. 8a

Non-Medical Indicia	Remarks
13. Patient Self-Assessment, or Family Assessment - Lack of Daytime Distractions	This data point is a predictor of treatment success.
14. Patient is a Smoker	Smoking complicates the delivery of health care services, has a direct relationship to health outcomes, and is a significant driver of health care costs.
15. Other Behavior Characteristics • Current • Past*	This is relevant to predict treatment success, to determine course of treatment, and as a stratification indicator.
16. Patient Matches Personality/Psychological Risk Profile	Personality characteristics are strong indicators of treatment success, and also provide guidance in determining choice of treatment.
17. Pending Litigation Relating to Injury	The existence of a pending lawsuit has a measurable relationship to treatment outcome, particularly as it relates to length of treatment.
 Patient is Overweight by more than 25% of Normal Weight 	Weight relates to treatment choice, treatment outcome and to health care complications (which relate to overall health care treatment costs.)
19. Patient's Job is in a High Work Risk Category	Patients in certain high-risk work categories, such as trucking and heavy industry, have a much higher incidence of low back injuries and other chronic pain indications.
20. Patient Involved in Recent or Pending Divorce	A patient's marital status relates to state of being, which is related to how well a patient will respond to treatment. It also relates to stress, which increases a patient's overall risk for an adverse health event.
21. Other Demographic Indicators: * Age * Religion * Economic status * Gender	Certain demographic factors, such as those listed, have a direct relationship to treatment choice, treatment outcome and health care complications (which relate to overall health care treatment costs.)
22. Open Workers' Compensation Claim	The existence an open workers' compensation claim is a significant predictor of treatment outcome, particularly as it relates to length of treatment it is also a variable an employer is interested in tracking.
23. Patient has Hired an Attorney for Representation on a Work-related Injury	The existence of an attorney has a measurable relationship to treatment success.
23. Patient has Hired an Attorney for Representation on a Work-related Injury	predictor of treatment outcome, particularly as it treatment. It is also a variable an employer is into The existence of an attorney has a measurable re treatment success.

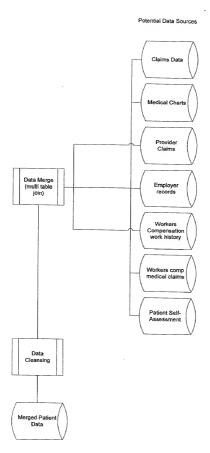


FIG. 9

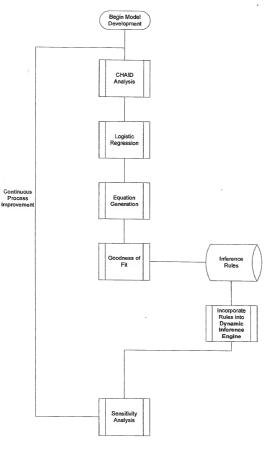


FIG. 10

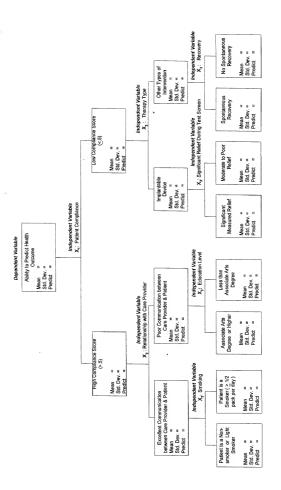


FIG. 11

Logistics Output	Variable		
Independent Variable	Parameter	Odds Ratio	P-Value
Constant	ŧ		
Number of Back Surgeries (X ₁)	(±)	3.1	P<0.05
Mental Health ($\geq 40 \text{ years}$) (X ₂)	(±)	2.1	P<0.05
Job Type (X3)	(+)	1.9	P<0.05
(X)			
(X _ξ)			

FIG. 12

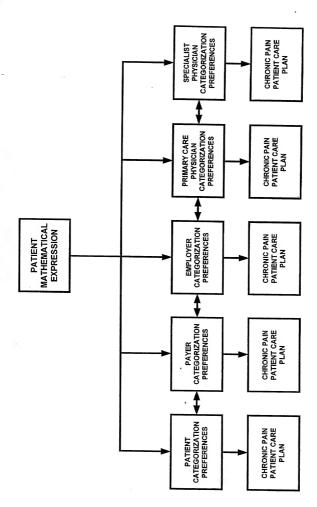


FIG. 13

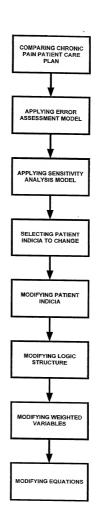


FIG. 14

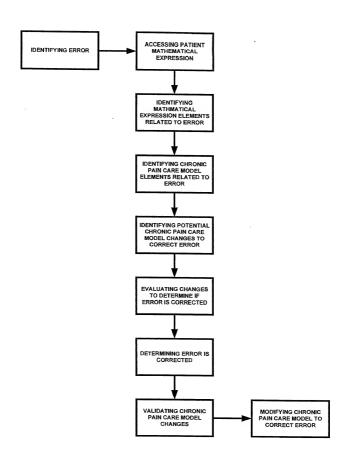


FIG. 15

